## Rocklin Community Theatre Audition Form - Youth

CONTACT INFORM	ATION:
Actor's Name	
Date of Birth / Grade	
Cell Phone	
Email Address	
Parent's Name(s)	
Home Phone	
Cell Phone(s)	
Email Address(es)	
	role(s), if any?
	pt? Check all that apply and list roles
☐ Ensemble	
EXPERIENCE / TRA	INING (or attach resume)
Previous shows / roles:	
Trevious shows recent	
Vocal:	
Dance:	
OTHER INFORMAT	ION (allergies, ride share, etc.)